

Animal Services Division Office of the State Veterinarian PO Box 42577

Olympia WA 98504-2577 Phone: (360) 902-1878 <u>ahealth@agr.wa.gov</u>

WSDA USE ONLY	
	5004
	3004

Application for an Independent Collector License

Fee: \$50.00 **Applicant Information** Name of Operator Phone Number Email Firm Name **Mailing Address** City Zip Code State **Physical Address of Plant** City State Zip Code Name of firm dead animals will be delivered to **Phone Number** Email **Vehicle Information** (attach additional sheets if more than 3 vehicles) Complete Address Where Vehicles Will Be Garaged Number of Vehicles Vehicle #1 Year Model Vehicle #1 Make Vehicle #1 Description Vehicle #1 License Number/State Vehicle #2 Year Model Vehicle #2 Make Vehicle #2 License Number/State Vehicle #2 Description Vehicle #3 Year Model Vehicle #3 Make Vehicle #3 License Number/State Vehicle #3 Description **Collection Territory Information** Cities to be Serviced Counties to be Serviced **Applicant Certification** I hereby certify that animals or animal parts will not be unloaded until delivered to the rendering plant specified above, and/or substation or place of transfer. I have reviewed and understand Chapter 16.68 RCW: DISPOSAL OF DEAD ANIMALS. I understand that all licenses expire June 30th each year. **Applicant Signature** Date Signed Payment & Submittal Check/Money Order (payable to WSDA) * One-time credit card application (3% fee) or eCheck Email application to: ahealth@agr.wa.gov Mail to: Washington State Department of Agriculture State Veterinarian An ePayment link will be emailed for secure payment. PO Box 42591 Email: Olympia WA 98504-2591

^{*} Checks returned by the bank will be charged a handling fee of \$ 25.00 (RCW 62A.3-515 (a) and 62A.3-520)